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## 370.10

### Agency Office Visit

#### Overview

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<b>Purpose of visit</b>	<p>An office visit reviews the following:</p> <ul style="list-style-type: none"><li>• Civil rights</li><li>• Work plan and program management</li><li>• Data system integrity</li><li>• Staff training and communications</li><li>• Service delivery</li><li>• Nutrition education</li><li>• Food delivery</li><li>• Vendor information</li><li>• Outreach</li><li>• Chart management</li></ul>
<b>State staff responsible</b>	<p>State office nutrition consultants complete office visits for their assigned agencies.</p>
<b>Review process</b>	<p>During a review, the nutrition consultant will:</p> <ul style="list-style-type: none"><li>• Collect and record the background data specified on the review tool,</li><li>• Interview local personnel about program operations,</li><li>• Review program documentation,</li><li>• Review a minimum of ten WIC records,</li><li>• Discuss program strengths, recommendations, and requirements, and</li><li>• Provide an opportunity for local agency feedback.</li></ul>
<b>Review tools</b>	<p>The office visit review tool begins on the next page. The clinic services record audit is found in Policy 370.10a.</p> <p><u>Note:</u> WIC Coordinators are encouraged to use these tools for self-assessment activities throughout the year.</p>

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## Required Documents

### Documents for review

The table below lists the documents that must be available during the visit.

Review Area	Documents Needed
Work plan and program management	<ul style="list-style-type: none"> <li>• Grant application (to be used as a reference)</li> <li>• Nutrition Education Needs Assessment</li> <li>• Action plans</li> </ul>
Data systems	<ul style="list-style-type: none"> <li>• Referral organizations</li> <li>• Security Plan</li> </ul>
Staff training and communications	<ul style="list-style-type: none"> <li>• Individual training and education records</li> <li>• Infectious disease control plan</li> <li>• Staff conflict of interest policy and signed forms</li> </ul>
Service delivery	<ul style="list-style-type: none"> <li>• WIC Policy and Procedure Manuals</li> <li>• Waiting list (if applicable)</li> <li>• Clinic cancellation policy</li> <li>• Missed appointment policy</li> <li>• Clinic walk-in policy</li> <li>• Formula Return Policy</li> <li>• MOUs and/or MOAs with community partners</li> </ul>
Nutrition education and breastfeeding support	<ul style="list-style-type: none"> <li>• Schedule for nutrition education classes</li> <li>• Lesson plans or curriculum for nutrition education classes</li> <li>• Medicaid nutrition reimbursement agreement</li> <li>• Samples of locally developed materials</li> </ul>
Food delivery and vendor information	<ul style="list-style-type: none"> <li>• Local agency tailoring policy</li> <li>• Retail and special purpose vendor lists</li> </ul>
Outreach	<ul style="list-style-type: none"> <li>• Log of activities</li> <li>• Record of where clients heard about WIC</li> <li>• Agency-developed materials</li> </ul>
Chart management and audit	<ul style="list-style-type: none"> <li>• Summary of internal clinic services record audit including: <ul style="list-style-type: none"> <li>• Five terminated participant records,</li> <li>• Five ineligible participant records,</li> <li>• Ten charts representative of all clinics and counties and including some women, infants and children</li> <li>• Documentation of the following: <ul style="list-style-type: none"> <li>-Rights and Responsibilities</li> <li>-Proxy cards</li> <li>-Medical Documentation Forms</li> </ul> </li> </ul> </li> </ul>

## WIC Agency Office Visit

### Background

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**Date**

**Agency**

**State Staff**

**Local Staff**

**Previous Office Visit**

Date:

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**Active participation**

	<b>Last FY</b>	<b>Current FY</b>	<b>Previous Month Month:</b>
Actual average monthly participation			
Assigned monthly participation			
$\frac{\text{Actual}}{\text{Assigned}} = \text{percent}$	%	%	

Comments:

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**Expenditures**

Total grant award for current FFY =

	<b>Last FY (\$ and %)</b>	<b>Year-to-date (\$ and %)</b>
Nutrition education expenditures		
Breastfeeding expenditures (min 3%)		
Total NE and BF expenditures (min 20%)		

Comments:

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*Continued on next page*

## Background, Continued

### Breast pumps

Number of breastfeeding women (Previous Month) =  
Breast pump expenditures for previous four quarters =

Pumps/Rentals	# Purchased/four quarters			
Manual				
Electric				
Rentals				
Collection Kits				
<b>Total \$ per quarter</b>				

### Comments

### Reports

*The following reports will be run by the nutrition consultant prior to the office visit and attached.*

Report	Time Period
Referral Report	Previous month
Processing Standards Non-Compliance Report	Previous month
Missed Appointment Report	Previous month

### Comments

### Issues and Concerns

Vendor System:  
Data System:  
Fiscal:  
Nutrition/Health Indicators:  
Other:

### Comments

## WIC Work Plan and Program Management

Collaboration,  
partnerships,  
referrals &  
MOUs/MOAs

	Meets/Exceeds	Not Met	Needs Improvement	NA
Collaboration, partnerships, referrals and/or MOUs/MOAs with the following:				
Maternal and Child Health				
Family Planning				
County Boards of Health Counties:				
County Public Health Nursing				
Head Start				
Early Childhood Iowa (ECI)/Decat				
I-Smile				
Community Health Centers				
Medical Community				
Parenting classees				
Coalitions				
Other partnerships/agencies participants are referred to/ MOUs/MOAs:				

Comments

Referral Process

	Meets/Exceeds	Not Met	Needs Improvement	NA
Follow-up is assigned (245.20)				
Agency-specific referral criteria				
Referral agreements with county DHS offices (360.20)				
Referral agreements with providers (245.20) Who?				

Comments

## WIC Work Plan and Program Management, Continued,

### Grant application

	Meets/Exceeds	Not Met	Needs Improvement	NA
Modifications to current action plans				
Demonstrates progress made towards implementing and/or completing planned action plan strategies and activities.				
Demonstrates progress made towards implementing and/or completing Quality Improvement activities				
Technical assistance requested/needed Describe:				
Mid-year progress report submitted				

### Comments

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### Local agency disaster plan

	Meets/Exceeds	Not Met	Needs Improvement	NA
Local agency has a disaster plan and it is updated annually				
Create and maintain a local point-of-contact list				
Conduct and/or attend local agency and state disaster training when scheduled				
Create and maintain one disaster kit at the main office and one for travel				

### Comments

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## WIC Data Systems

### Data system

	Meets/Exceeds	Not Met	Needs Improvement	NA
Staff only use assigned security token when accessing data system train or production environments				
Local Agency Security Plan (330.10)				
Person assigned to synchronization and verification Who/Backup:				
Data system reports are used to monitor trends				

### Comments

### Data management

	Meets/Exceeds	Not Met	Needs Improvement	NA
Nutrition Surveillance Data (electronic or paper copy)				
Uses WIC Nutrition Education Needs Assessment technical assistance document (380.10). If no, how do you evaluate your trends?				
Collects participant feedback and/or perceived needs? - How is feedback collected? - How often is feedback collected?				
Involved in county community needs assessment and health improvement planning (CHNA & HIP) activities				
Results from the community needs assessment and health improvement planning (CHNA & HIP) utilized				
Communicate WIC priorities to county Boards of Health or other local health planning committees utilized				
WIC data is communicated to others. Who/How?				

### Comments

*Continued on next page*

## WIC Data Systems, Continued

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### Other data sources

	Meets/Exceeds	Not Met	Needs Improvement	NA
Iowa Newborn Metabolic Screening Profiles				
Iowa Vital Statistics				
Iowa Health Fact Book				
Iowa Kid's Count				
Other:				

### Comments:

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## WIC Staff Training and Communication

### Staffing

Position	Names
Support Staff	
Dietitians	
Nutrition Educators*	
Nurses*	
Lead Clinic Staff	
Breastfeeding Coordinator	
Nutrition Coordinator	
Data Coordinator	
Early ACCESS Contact	
Data System Contact(s)	
eWIC Contact	
Quality Improvement (QI) Contact	
Outreach Contact	
Vendor Contact	
Breastfeeding Peer Counselor Coordinator	
Breastfeeding Peer Counselors	
Verification of current licensure of professional staff is on file	
* Identify those who are functioning as a CPAs	

Comments:

### Communication

	Meets/Exceeds	Not Met	Needs Improvement	NA
Changes to agency staff list (310.30)				
State agency policies communicated to staff and others (420.05) How?				
Friday Facts shared with all WIC staff (420.05)				
Staff have access to email				

Comments:

## WIC Staff Training and Communication, Continued

### Training and in-services

	Meets/Exceeds	Not Met	Needs Improvement	NA
Provide local agency new employee orientation (300.10)				
Individual training records are current for each staff person (300.10)				
Staff participate in continuing education activities beyond required events (300.10)				
Complete new employee training checklists for new staff (300.11)				
New staff complete data system training homework appropriate for their position				
Implement a staff conflict of interest policy (WIC staff who are also WIC participants) (310.35)				
Civil rights training provided to new employees and information shared annually (320.50)				
Provide infectious disease control plan and annual training (360.60) Recent training date: Individual Hepatitis B documentation is current for each staff person. Individual TB test results and documentation are current for each staff person.				
Provide opportunities for cross-training				
Provides training plan for all nurses working as CPA's.				

### Comments

## WIC Service Delivery

### Participant notification

	Meets/Exceeds	Not Met	Needs Improvement	NA
Notification of program changes (300.45) How communicated with participants? How long before?				
Missed check pick-up policy (225.75)				
Written clinic cancellation policy				
Appointment reminders provided				
Written appointment procedures				
Reminder and follow-up phone calls provided				
Pending Terminations: Participants are notified if their certification is about to expire within 15 days, but no more than 45 days of expiration of their certification end date (215.30) Describe:				

### Comments:

## Nutrition Education and Breastfeeding Support

### Materials

	Meets/Exceeds	Not Met	Needs Improvement	NA
New materials developed or adapted by agency				
Agency-developed materials contain a program credit and publication date				
Use the nutrition education material evaluation tool (380.50)				
Use materials from other agencies/organizations Describe:				
Offer nutrition education/breastfeeding items Describe:				

### Comments

### Breastfeeding promotion and support

	Meets/Exceeds	Not Met	Needs Improvement	NA
Community breastfeeding linkages formed (380.15) Describe:				
Link with local breastfeeding coalition				

### Comments:

## Food Delivery and Vendor Information

### FI issuance

	Meets/Exceeds	Not Met	Needs Improvement	NA
Secure FI stock between clinics (225.65)				
FI ordering process in place (2 <sup>nd</sup> person verifies order received)				

### Comments

### Formulas

	Meets/Exceeds	Not Met	Needs Improvement	NA
Implement a local agency formula return policy (235.65)				

### Comments

*Continued on next page*

## Food Delivery and Vendor Information, Continued

### Participant violations & appeals

	Meets/Exceeds	Not Met	Needs Improvement	NA
Used participant violation process in last year (225.80)				
Used restitution policy in last year (225.80)				
Suspended participants in last year (225.80)				
Filed a participant incident report form (300.15)				
Have procedure on file for complaints of discrimination (320.40)				
Participant has used the appeals process in the last year (350.30) Describe:				
If applicable, monitoring dual participation of bordering states (450.50)				
Describe current problems:				

### Comments

### Vendors

	Meets/Exceeds	Not Met	Needs Improvement	NA
Current vendor list (215.10) How distributed? How often is the vendor list distributed to participants compared to the Vendor List Report in the data system?				
Separate special purpose vendor list				
Follow-up on problems between participant and vendor Who/How?				
Adequate special purpose vendors				
Local vendor issues:				

### Comments:

## WIC Caseload & Outreach

### Caseload

	Meets/Exceeds	Not Met	Needs Improvement	NA
Use reports to project growth/cut-backs				
Measures in place to increase/maintain caseload (300.35)				
Follow-up done on missed prenatal appointments (215.23) Who/How:				
Appointments meet the 10-20 day limit (215.20) Options offered:				
Problems with missed appointments or cancellation rates				
Monitor participant satisfaction				
Offer participant items				
Precertifications offered – Infants By who?				
Pre-certifications offered – Pregnant women By who?				
Priority class(es) not served:				
Waiting list started and contains required information (300.35)				

### Comments

*Continued on next page*

## WIC Caseload & Outreach, Continued

### Outreach efforts

	Meets/Exceeds	Not Met	Needs Improvement	NA
Hospital based agency and/or clinics provide WIC information to potential participants (360.40)				
Maintain log of outreach activities. Log includes date of activity, time of activity, type of outreach, and number of people attending, if available. (360.40)				
WIC contact and/or outreach workers available between clinics in each county				
WIC contacts are notified of policy changes How?				
Evaluation of outreach results recorded				
Activities relay positive breastfeeding messages				
Developed agency-specific outreach materials				

*Continued on next page*

### Comments

### Outreach strategies – RFA/RFP

List and describe the specific outreach strategies focused on in the RFA/RFP.

Outreach strategy	Description of strategy and progress made	Description of procedures used to monitor & document impact

### Comments



## Summary

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**Agency strengths**

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**Recommendations**

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**Requirements**  
(include reference  
to policy)

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**Additional  
comments**

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**Attachment**      The clinic services record audit is attached.

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Signature/Date  
Regional Nutrition Consultant  
Bureau of Nutrition & Health Promotion  
Iowa Department of Public Health

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